PTO/SB/17 (12-04v2)
Approved for use through 7/31/2006. OMB 0651-0032

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	Effective on 12/08/				Сотр	lete if Knowl	n	
Fees pursuant to the	Effective on 12/06/ Consolidated Approp		I.R. 4818).	Application Nun	nber 09	9/638,192		
FFF	<b>TRANS</b>	MITTAL		Filing Date	A	ugust 15, 200	0	
			-	First Named Inventor Ivan A. COWIE				
	For FY 20	JU6		Examiner Name G. Munoz				
Applicant of	claims small entity stat	us. See 37 CFR 1.	27	Art Unit	26	634		
TOTAL AMOUN	T OF PAYMENT	(\$) 510.0	0	Attorney Docket	No. 28	8549-165559		
METHOD OF F	METHOD OF PAYMENT (check all that apply)							
Check Credit Card Money Order None Other (please								
X Deposit Acc	OUNT Deposit Account	 Number: <u>22-0261</u>	Deposit Acc			Venable LLP	<b>,</b>	
For the al	bove-identified dep	osit account, the	Director is	hereby authorize	ed to: (check	all that apply)		
X Cha	arge fee(s) indicated	d below		Charge	e fee(s) indic	cated below, ex	cept for the	filing fee
	arge any additional (s) under 37 CFR 1		yment of	X Credit	any overpay	ments		
FEE CALCULA	ATION (All the fe	es below are	due upo	n filing or may	be subjec	t to a surcha	rge.)	
	, SEARCH, AND E				· ···			
	FI	LING FEES		ARCH FEES	EXAMINA	ATION FEES		
Application Typ	oe Fee (\$	Small Entity Fee (\$)	Fee (\$	Small Entity ) Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fees Pa	id (\$)
Utility	300		500	250	200	100		141
Design	200		100	50	130	65		
Plant	200		300	150	160	80		
Reissue	300		500	250	600	300	· · · · · · · · · · · · · · · · · · ·	
	200		0	0	0	0		
Provisional		100	U	U	U			mall Entity
2. EXCESS CLAI	M FEES						Fee (\$)	Fee (\$)
Fee Description	r 20 (including Re	eissues)					50	25
					100			
Multiple depend			,				360	180
Total Claims	Extra Claims	Fee (\$)	Fee I	Paid (\$)	Mul	tiple Depende	nt Claims	
		x =		=-= (47	Fee		ee Paid (\$)	
	r of total claims paid t		0.	<del></del>				_
Indep. Claims	Extra Claims	Fee (\$)	Fee	Paid (\$)	·			-
-3 = x = HP = highest number of total claims paid for, if greater than 3. 3. APPLICATION SIZE FEE								
If the specification and drawings exceed 100 sheets of paper (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50								
listings und	raction thereof.	e)), the applicat	(ION SIZE (1/2)/1)/(	iee due is \$250 3) and 37 CFR	/ (\$125 for 8 1.16(s)	sman entity) it	or each au	JILIOHAI 50
Total Sheets				idditional 50 or fra		Fee (\$)	Fee P	aid (\$)
Total Sileets	- 100 =		i oi oacii e	(round up to a who			<u></u>	147
4. OTHER FEE(S)  Fees Paid (\$)								
Non-English Specification, \$130 fee (no small entity discount)								
Other (e.g., late filing surcharge): PETITION FOR (3-MO.) EXTENSION OF TIME \$ 510.00								
FEITHORY ON (0-MO.) EXTENSION OF THREE \$ 510.00								
CUDAINTEE	/							
SUBMITTEO BY Signature	1/2 xlax	AI	$\sim$	Registration No.	33,471	Telephone	(202) 344	-4000
6/	X JOWY		<del>/_</del> -	(Attorney/Agent)	30,471	<u> </u>	<del></del>	
Name (Print/Type)	Kobert S. Babay		/			Date	April 4,	2006 

#738795

APR 0 4 2006 PTO/SB/21 (08-00)

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	Application Number	09/638,192		
TRANSMITTAL	Filing Date	August 15, 2000		
FORM	First Named Inventor	Ivan A. COWIE		
ed for all correspondence after initial filing)	Group Art Unit	2634		
	Examiner Name	G. Munoz		

(to be used for all correspondence after init	ial filing)	Group Art Unit	2634					
		Examiner Name	G. Munoz					
Total Number of Pages in This Submission		Attorney Docket Number	28549-165559					
ENCLOSURES (check all that apply)								
Fee Transmittal Form	Assignment and Recordation Form Cover Sheet		After Allowance Communication to Group					
Fee Attached	☐ Drawing(s)		Appeal Communication to Board of Appeals and Interferences					
Response To Fourth Office Action	Licensing-related Papers		Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)					
After Final	☐ Petition		Proprietary Information					
Affidavits/declaration(s)		on to Convert to a sional Application	Status Letter					
Extension of Time Request (3 Mos.)	Power of Attorney, Revocation Change of Correspondence Address		Other Enclosure(s) (please identify below):					
Express Abandonment Request	Termi							
Response to Restriction Requirement	CD, Number of CD(s)							
Certified Copy of Priority Document(s)	Remarks							
Response to Missing Parts/ Incomplete Application								
Response to Missing Parts Under 37 CFR 1.52 or 1.53								
SIGNA	TURE OF	APPLICANT, ATTORNEY, C	PR AGENT					
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